## ANNUAL PLAN FOR FISCAL YEAR 2011 LIVERMORE HOUSING AUTHORITY

Adopted: April 13, 2011 Resolution #565

## PHA 5-Year and Annual Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

| 1.0 | PHA Information HOUSING AUTHOR PHA Name: Housing Authority of the City PHA Type:   Small   Hig PHA Fiscal Year Beginning: (MM/YYYY)   | of Livermore<br>h Performing   | PHA Code:074                         | HCV (Section 8)                  |                              |                |  |  |  |  |  |  |
|-----|---|--------------------------------|--------------------------------------|----------------------------------|------------------------------|----------------|--|--|--|--|--|--|
| 2.0 | Inventory (based on ACC units at time of Number of PH units:125_  | FY beginning<br>—              |                                      | umber of HCV units: _719         |                              |                |  |  |  |  |  |  |
| 3.0 | Submission Type  5-Year and Annual Plan   | Annual                         | Plan Only                            | 5-Year Plan Only                 |                              |                |  |  |  |  |  |  |
| 4.0 | PHA Consortia   | PHA Consorti                   | a: (Check box if submitting a joi    | nt Plan and complete table be    | elow.)                       |                |  |  |  |  |  |  |
|     | Participating PHAs  | PHA<br>Code                    | Program(s) Included in the Consortia | Programs Not in the<br>Consortia | No. of Unit<br>Program<br>PH | ts in Each HCV |  |  |  |  |  |  |
|     | PHA 1:  |                                |                                      |                                  | 111                          | The v          |  |  |  |  |  |  |
|     | PHA 2:  |                                |                                      |                                  |                              |                |  |  |  |  |  |  |
|     | PHA 3:  | 1 . 5 37                       | Di l                                 |                                  |                              |                |  |  |  |  |  |  |
| 5.0 | <b>5-Year Plan.</b> Complete items 5.1 and 5.2 of   | only at 5-Year                 | Plan update.                         |                                  |                              |                |  |  |  |  |  |  |
| 5.1 | Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:   |                                |                                      |                                  |                              |                |  |  |  |  |  |  |
| 5.2 | Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. |                                |                                      |                                  |                              |                |  |  |  |  |  |  |
|     | PHA Plan Update   |                                |                                      |                                  |                              |                |  |  |  |  |  |  |
| 6.0 | <ul><li>(a) Identify all PHA Plan elements that ha</li><li>(b) Identify the specific location(s) where telements, see Section 6.0 of the instruction</li></ul>  | the public may                 |                                      |                                  | mplete list of PF            | łA Plan        |  |  |  |  |  |  |
|     | Copies of the 5-year and Annual Plans can<br>3203 Leahy Way, Livermore, CA 9455   |                                |                                      | re Housing Authority Admin       | istration Office,            |                |  |  |  |  |  |  |
|     | All other Plan elements are addressed in the<br>Policies. These are also available for re   |                                |                                      |                                  | Admissions and               | Occupancy      |  |  |  |  |  |  |
|     | Hope VI, Mixed Finance Modernization  |                                |                                      |                                  | Housing, Home                | ownership      |  |  |  |  |  |  |
| 7.0 | Programs, and Project-based Vouchers.   | Include state                  | ments related to these programs      | as applicable.                   |                              |                |  |  |  |  |  |  |
|     | The Livermore Housing Authority Housing   |                                |                                      |                                  |                              |                |  |  |  |  |  |  |
| 8.0 | The Livermore Housing Authority continue Capital Improvements. Please complete I  |                                |                                      | tly there are 87 units under co  | ontract                      |                |  |  |  |  |  |  |
| 0.0 |   |                                |                                      |                                  |                              |                |  |  |  |  |  |  |
| 8.1 | Capital Fund Program Annual Statemen complete and submit the <i>Capital Fund Program</i> open CFP grant and CFFP financing. Cal   | gram Annual                    |                                      |                                  |                              |                |  |  |  |  |  |  |
| 8.2 | Capital Fund Program Five-Year Action Program Five-Year Action Plan, form HUI for a five year period). Large capital items  | D-50075.2, an<br>must be inclu | d subsequent annual updates (on      | a rolling basis, e.g., drop cur  |                              |                |  |  |  |  |  |  |
| 8.3 | Capital Fund Financing Program (CFFF Check if the PHA proposes to use any pfinance capital improvements.  |                                | Capital Fund Program (CFP)/Rep       | lacement Housing Factor (RF      | IF) to repay deb             | t incurred to  |  |  |  |  |  |  |

- Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. Ca074b01
- 9.1 Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Ca074b01
- 10.0 Additional Information. Describe the following, as well as any additional information HUD has requested.
  - (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. Ca074j01
  - (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" Ca074i01
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
     Ca074c01
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only) Ca074d01
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only) Ca074f01
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only) Ca074e01
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only) Ca074e01
  - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. CA074k01
  - (g) Challenged Elements none
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only) Ca074m01

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

#### **Instructions form HUD-50075**

**Applicability**. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

#### 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

#### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

#### 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

#### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

#### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

- **5.1 Mission**. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- **5.2** Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.
- **6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
  - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
  - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

- 2. Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- 7. Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- 8. Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
  - (a) Hope VI or Mixed Finance Modernization or Development. 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
  - http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
  - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo\_dispo/index.cfm

**Note:** This statement must be submitted to the extent **that approved and/or pending** demolition and/or disposition has changed.

(c) Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <a href="http://www.hud.gov/offices/pih/centers/sac/conversion.cfm">http://www.hud.gov/offices/pih/centers/sac/conversion.cfm</a>

- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
  - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
    - (a) To submit the initial budget for a new grant or CFFP;
    - (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
    - (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is completed or all funds are expended;
- When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- Upon completion or termination of the activities funded in a specific capital fund program year.

#### 8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

**8.3** Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

- portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
- $\underline{http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm}$
- 9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- **10.0** Additional Information. Describe the following, as well as any additional information requested by HUD:
  - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
  - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments.
  - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.

## Ca074a02

## **ATTACHMENTS**

| Ca074a02 | List of Attachments   |
|----------|---|
| Ca074b02 | Housing Needs   |
| Ca074c02 | <b>HUD 50077 Certification of Compliance with the PHA Plans and</b> |
|          | Related Regulations   |
| Ca074d02 | <b>HUD 50070 Certification of a Drug-Free Workplace</b>             |
| Ca074e02 | <b>HUD SL-LLL Disclosure of Lobbying Activities</b>                 |
| Ca074f02 | <b>HUD 50071 Certification of Payments to Influence Federal</b>     |
|          | Transactions  |
| Ca074g02 | <b>HUD 50077-CR</b> Civil Rights Certification                      |
| Ca074h02 | <b>HUD 50077-SL</b> Certification by State or Local Official of     |
|          | consistency with the Consolidated Plan                              |
| Ca074i02 | Substantial Deviation & Significant amendment or modification       |
| Ca074j02 | Progress in meeting Mission and Goals of 5-year plan                |
| Ca074k02 | Resident and Public Comments  |
| Ca074102 | <b>HUD 50075.1 Capital Fund Annual Statement/Performance and</b>    |
|          | Evaluation Report   |
| Ca074m02 | HUD 50075.2 Capital Fund Program Five-Year Action Plan              |
|          |   |

#### HOUSING NEEDS

There is a great unmet need for affordable housing in Livermore which is detailed in the 2005-2010 Consolidated Plan covering the LHA jurisdiction. These are identified by income, family type and specific housing problems.

Household income is a key factor in a family's ability to balance housing costs with other basic necessities. Low income households had a disproportionate need for Housing Assistance compared with moderate income households. Current weak economy, loss of jobs and a tight housing market have developed a number of "working poor" who need housing assistance.

In addition, low income households (31%-50%MFI) experienced one or more housing problems including overcrowding and inadequate facilities.

Demographic changes have increased the number of non-English-speaking populations.

The Livermore Housing Authority is committed to ensuring that Housing and social services meet the needs of all income levels. The following strategies will be used to achieve this Goal:

Maximize the number of affordable units available to the LHA within its current resources by:

- Continuing to maintain Public Housing, Housing Choice Voucher and low rent housing to provide safe and sanitary units.
- Reducing turnover time for vacated public housing units.
- Continuing to pursue additional housing by aliening with the local government and private agencies. This includes participation in the Consolidated Plan development process.
- Continuing to develop the Housing Choice Voucher home ownership program.
- Continuing to encourage community support to develop affordable housing.
- Continuing to encourage local property owners to participate in the HCV Program particularly outside of areas of minority and poverty concentration.
- Undertaking measures to ensure access to affordable housing among families assisted by the LHA, regardless of unit size required.
- Adjusting HCV payment standards that will enable families to rent in the jurisdiction.
- Maintaining or increasing HCV lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of the program.
- Continuing the Section 8 Project Based Program.

Increase the number of affordable housing by:

- Applying for additional Section 8 units should they become available.
- Leveraging affordable housing resources in the community through the creation of mixed-finance housing.
- Continuing to pursue housing resources other than public housing or Section 8 tenant-based assistance.

Target available assistance to families at or below 30% of AMI by:

• Adopting rent policies to support and encourage work.

Target available assistance to families at or below 50% of AMI by:

- Employing admissions preferences aimed at families who are working.
- Adopting rent policies to support and encourage work.

Target available assistance to the elderly by:

• Applying for special-purpose vouchers targeted to the elderly, should they become available.

Target available assistance to Families with Disabilities by:

- Carrying out any modifications needed in public housing based on the Section 504 Needs Assessment for Public Housing.
- Providing special accommodations, when warranted, in Public Housing and HCV Programs
- Applying for special purpose vouchers targeted to families with disabilities, should they become available.

Increase awareness of LHA resources among families of races and ethnicities with disproportionate needs.

Conduct activities to affirmatively further fair housing by:

- Counseling HCV tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units.
- Marketing the Section 8 HCV program to owners outside of areas of poverty/minority concentrations.
- Providing language assistance to those families that English is not a first language.

The following will influence the LHA's selection of strategies:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community

# Certification for a Drug-Free Workplace

## U.S. Department of Housing and Urban Development

Applicant Name HOUSING AUTHORITY OF THE CITY OF LIVERMORE Ca074d01 Program/Activity Receiving Federal Grant Funding 2011 AGENCY PLAN Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below: I certify that the above named Applicant will or will continue (1) Abide by the terms of the statement; and to provide a drug-free workplace by: (2) Notify the employer in writing of his or her convica. Publishing a statement notifying employees that the untion for a violation of a criminal drug statute occurring in the lawful manufacture, distribution, dispensing, possession, or use workplace no later than five calendar days after such conviction; of a controlled substance is prohibited in the Applicant's worke. Notifying the agency in writing, within ten calendar days place and specifying the actions that will be taken against after receiving notice under subparagraph d.(2) from an ememployees for violation of such prohibition. ployee or otherwise receiving actual notice of such conviction. b. Establishing an on-going drug-free awareness program to Employers of convicted employees must provide notice, includinform employees --ing position title, to every grant officer or other designee on whose grant activity the convicted employee was working, (1) The dangers of drug abuse in the workplace; unless the Federalagency has designated a central point for the The Applicant's policy of maintaining a drug-free receipt of such notices. Notice shall include the identification workplace; number(s) of each affected grant; (3) Any available drug counseling, rehabilitation, and f. Taking one of the following actions, within 30 calendar employee assistance programs; and days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace. (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the c. Making it a requirement that each employee to be engaged requirements of the Rehabilitation Act of 1973, as amended; or in the performance of the grant be given a copy of the statement required by paragraph a.; (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program apd. Notifying the employee in the statement required by paraproved for such purposes by a Federal, State, or local health, law graph a. that, as a condition of employment under the grant, the enforcement, or other appropriate agency; employee will --g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f. 2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.) Check here if there are workplaces on file that are not identified on the attached sheets. I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802) Name of Authorized Official JON D. HOVEY **EXECUTIVE DIRECTOR** on D. Toloney Date 02/14/11

#### Attachment Ca074e01

#### DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

Approved by OMB 0348-0046

3. Report Type: 1. Type of Federal Action: 2. Status of Federal Action: a. bid/offer/application a. initial filing a. contract b. initial award b. material change b. grant c. cooperative agreement c. post-award For Material Change Only: d. loan quarter e. loan guarantee date of last report\_ f. loan insurance 4. Name and Address of Reporting Entity: 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Subawardee × Prime Tier \_\_\_\_\_, if known: Congressional District, if known: 4c Congressional District, if known: 7. Federal Program Name/Description: 6. Federal Department/Agency: US DEPARTMENT OF HOUSING & URBAN 2011 AGENCY PLAN CFDA Number, if applicable: 8. Federal Action Number, if known: 9. Award Amount, if known: b. Individuals Performing Services (including address if 10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): different from No. 10a) (last name, first name, MI): **NONE** 11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the Signature: < Jon D. Hovey Print Name: **Executive Director** Title: required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. Telephone No.: (925) 447-3600 02/14/11 Date: Authorized for Local Reproduction Federal Use Only: Standard Form LLL (Rev. 7-97)

### **Certification of Payments to Influence Federal Transactions**

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

| HOUSING AUTHORITY OF THE CITY OF LIVERMORE       | ATTACHMENT Ca074 <b>f</b> 01 |
|--|------------------------------|
|  |                              |
| Program/Activity Receiving Federal Grant Funding |                              |
| 2011 AGENCY PLAN                                 |                              |

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

JON D. HOVEY

Title

EXECUTIVE DIRECTOR

Signature

gon D. 7-toney

Date (mm/dd/yyyy)

02/14/2011

## **Civil Rights Certification**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Attachment Ca074g01

074

PHA Number/HA Code

#### **Civil Rights Certification**

PHA Name

#### **Annual Certification and Board Resolution**

Housing Authority of the City of Livermore

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

| I hereby certify that all the information stated herein prosecute false claims and statements. Conviction is | n, as well as any information promay result in criminal and/or civil | vided in the accompaniment here penalties. (18 U.S.C. 1001, 101 | ewith, is true and accurate. Warning: HUD will 0, 1012; 31 U.S.C. 3729, 3802) |
|--|--|---|---|
|  |  |   |   |
| Name of Authorized Official  | Jon D. Hovey   | Title   | Executive Director  |
| Signature Go D. 74   | oven   | Date 2   14   1   | ,   |

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

# Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

| I,      | LINDA GARDNER       | the         | HOUSING DIR       | ECTOR       | certify  | that th | ne Five  | Year   | and  |
|---------|---------------------|-------------|-------------------|-------------|----------|---------|----------|--------|------|
| Annual  | PHA Plan of the     | LIVERMORE H | OUSING AUTHORITY  | is consiste | ent with | the Co  | nsolidat | ed Pla | n of |
| ALAMEDA | COUNTY HOME CONSORT | IUM prepare | ed pursuant to 24 | CFR Part    | 91.      |         |          |        |      |

Cui Wor March 23, 2011

Signed / Dated by Appropriate State or Local Official

Alanda County Horsing Director

## "SUBSTANTIAL DEVIATION" AND SIGNIFICANT AMENDMENT OR MODIFICATION

The Livermore Housing Authority will define the following amendments of modifications as considerable departure from present 5 year and Annual Plan:

- significant changes to admissions policies;
- significant changes of waiting list preferences;
- significant changes of non-emergency work items, over \$50,000, not included in current annual statement or 5 year action plan; or
- change of homeownership activities.

Any changes adopted to reflect HUD regulatory requirements will not be considered "substantial" or "significant". These changes will not be considered significant amendments.

#### PROGRESS IN MEETING MISSION AND GOALS OF 5-YEAR PLAN

LHA Goal: Increase the availability of decent, safe and affordable Housing.

Expand the supply of assisted housing.

- The Housing Authority has aligned itself with the City of Livermore to develop more affordable units in the City. With this partnership, the LHA has purchased 42 units of low-rent units.
- The Housing Authority has implemented a Section 8 Housing Choice Voucher (HCV) Home Ownership Program.
- The Project Based HCV program continues to be used to provide for special needs of families having difficulty finding affordable units.
- The Section 8 HCV Special Housing types are available, if needed.
- The Housing Authority will apply for additional rental vouchers should they become available.

#### LHA Goal: Improve the quality of assisted housing.

- The Housing Authority continues to maintain 125 units of Public Housing, 42 units of low-rent housing including 7 transitional units and 719 Section 8 HCV units.
- The Housing Authority maintains a Preventive Maintenance Program for the Leahy Square Apartments as well as the Bluebell Apartments, the Chestnut Apartments and the Las Posadas Apartments.
- The physical condition of units continues to improve with schedules for tree trimming, gutter repair, appliance replacements, heater replacements, etc.
- Roof repairs at Leahy Square are scheduled for this spring.
- Installation of free-standing air conditioners in all units at Leahy Square.
- The Housing Authority continues to improve and maintain voucher and public housing management.

#### LHA Goal: Increase assisted housing choices;

- Payment standards in the Section 8 HCV Program are continuously analyzed and adjusted as needed to help families obtain and retain affordable housing.
- The LHA has partnered with the Tri-Valley Opportunity Center and ECHO housing to assist families acquire and maintain housing.
- The ongoing development of the HCV Homeownership Program has increased opportunities for tenants.

#### LHA Goal: Provide an improved living environment.

- The Housing Authority continues to improve the physical condition of Housing Authority properties by using Capital Funding and applying for other resources.
- The Housing Authority does criminal background checks on all adult applicants and residents.
- The Housing Authority continues to partner with the Livermore Police Department to maintain security on Housing Authority properties. Private security services are provided on a partime basis.
- The Housing Authority provides information for residents by posting materials and providing referral information.
- The Housing Authority complies with the Violence Against Women Act (VAWA) to support and assist victims of domestic violence, dating violence, sexual assault or stalking.

#### LHA Goal: Promote Self-Sufficiency and asset development of families.

- On-site Pre-School Program (CAPE) provides services to resident children.
- Counseling services and referrals are provided for Family Self-Sufficiency (FSS) and transitional families.
- The HCV Homeownership program continues to counsel families.
- The Housing Authority provides scholarships to Public Housing and HCV family members. \$4000 in scholarship monies were awarded in 2010.
- The Housing Authority provides waiting list preferences to encourage selfsufficiency.

#### LHA Goal: Ensure equal opportunity and affirmatively further fair housing.

- The Housing Authority undertakes affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status or disability.
- The Housing Authority continues to work with disability groups to provide supportive services for families with disabilities and elderly to find and maintain accessible housing.
- Upon request, the Housing Authority will provide special accommodations for persons with disabilities so that they may participate in its programs.
- The Housing Authority assesses needs of families who have Limited English Proficiency (LEP). When requested, information is translated, both oral and written, using both staff and translation services.
- Fair housing information is provided.
- The Housing Authority continues to assist all families by updating and implementing policies in accordance with HUD regulations.

Other Housing Authority Goals and Objectives:

- The Housing Authority continues to maintain efficient asset management.
- The Housing Authority periodically reviews operations to keep up with changing needs.
- The Housing Authority continues management/staff professional development relating to customer service, program technical capacity and interpersonal communication skills.
- The Housing Authority continues to deter and eliminate Program fraud by taking these steps to prevent fraud, waste or mismanagement:
  - -Written materials are provided promoting understanding of program rules.
    - -Program briefings are required prior to participation.
    - -Reporting responsibilities are reviewed at all renewal interviews.
    - -Signs are posted in the management office
  - -The Housing Authority utilizes credit reporting agencies to verify income and other information.
  - -The Housing Authority utilizes the Enterprise Income Verification (EIV) a web based computer system that contains employment and income information of individuals who participate in HUD rental assistance programs.
  - -The Housing Authority continues to improve its Internal Quality Control system.

#### RESIDENT AND PUBLIC COMMENTS

#### LIVERMORE HOUSING AUTHORITY

#### **Resident Advisory Board Meeting**

All residents of the Livermore Housing Authority Section 8 Housing Choice Voucher Program and residents of the Leahy Square Public Housing Apartments are considered members of the Resident Advisory Board (RAB) for purposes of preparation and review of the Annual Plan.

#### **Staff Present:**

Louise M. Jaramillo, Asst. Director/Housing Operations

Introduction: Staff reviewed the regulatory process that the Livermore Housing Authority is required to go through each year as part of the Agency Plan process. The Livermore Housing authority will be submitting it's 2011 Annual Plan. The purpose of the Advisory Board was reviewed and participants were encouraged to participate by asking questions, providing ideas and making comments.

Public Housing Residents expressed satisfaction with improvements done this past year. These included providing each resident with a standing air conditioner. Air conditioning was not required when Leahy Square was built. Summer weather in the Livermore Valley can be very brutal at times. The Livermore Housing Authority has been trying for several years to find an affordable solution. Size was mentioned as a problem but overall feedback was very positive. Ceiling fans will also be provided as an on-going process.

A question was asked regarding installation of garbage disposals. The Housing Authority has no immediate plans to install any at this time but may consider when future replacement of countertops occurs.

Although there are still some incidents, residents related that security has improved at Leahy. Graffiti is still a problem from time to time. Staff advised that graffiti is removed immediately. Evictions of several families with gang attachments have helped to improve safety. Residents related that non-resident visitors sometimes congregate here. Families are encouraged to continue calling the Livermore Police Department.

A question was asked regarding Leahy's Parking Policy. One participant felt that the Policy was not being enforced evenly. She was advised that the Housing

Authority employee assigned to enforce the parking policy tries to work with families in hopes of avoiding measures such as towing or tenant violations. It may appear that nothing is being done.

Participants were advised that the Section 8 Housing Voucher program will open in 2011. It has been closed for several years. Response is expected to be heavy therefore, the Housing Authority is currently investigating several computer programs for application taking.

Several participants discussed the need to continue to improve public relations and communications with Residents and participants. Staff advised that this is a priority and that staff receive ongoing training.

A question was asked regarding the Family Self-Sufficiency Program. The program was reviewed and questions answered. Participants were advised that, at this time, participation is limited to Housing Choice Voucher families.

There were no further comments.

#### **PUBLIC NOTICE**

A Public Notice was published on February 16, 2011, inviting public comment regarding the Agency Plan and notifying the public of the Public Hearing scheduled for April 5, 2011. Copies of the Draft and supporting documents are available for review during normal business hours at the Livermore Housing Authority Administration Office.

#### **PUBLIC HEARING**

Livermore Housing Authority Commissioner Carl Asbury called a Public Hearing meeting to order on April 5, 2011 at 5:30PM. The Hearing was to review and hear comments on the final Draft of the 2011 Annual Plan. Staff provided copies of the Plan. All other supportive documents were also made available for review and/or for questions. Discussion resulted in no change to Draft.

The meeting was adjourned at 5:45PM.

The Annual Plan was brought before the Board of Commissioners on April 13, 2011. Plan reviewed and Resolution passed.

## **Attachment Ca074m01**

| Part | t I: Summary   |   |                                      |                                   |                                   |                                      |
|------|--|---|--------------------------------------|-----------------------------------|-----------------------------------|--------------------------------------|
| PHA  | Name/Number Livermore H                              | Housing Authority                           | Livermore, Alamed                    | la County, California             | Original 5-Year Plan              | Revision No:                         |
| A.   | Development Number and<br>Name<br>Ca074 Leahy Square | Work Statement<br>for Year 1<br>FFY<br>2011 | Work Statement for Year 2<br>FFY2012 | Work Statement for Year 3 FFY2013 | Work Statement for Year 4 FFY2014 | Work Statement for Year 5<br>FFY2015 |
| В.   | Physical Improvements<br>Subtotal                    | Kohyki/Sokykykyk                            |                                      |                                   |                                   |                                      |
| C.   | Management Improvements                              |   |                                      |                                   |                                   |                                      |
| D.   | PHA-Wide Non-dwelling<br>Structures and Equipment    |   |                                      |                                   |                                   |                                      |
| E.   | Administration                                       |   |                                      |                                   |                                   |                                      |
| F.   | Other  |   |                                      |                                   |                                   |                                      |
| G.   | Operations   |   | \$215,000                            | \$215,000                         | \$215,000                         | \$215,000                            |
| H.   | Demolition   |   |                                      |                                   |                                   |                                      |
| I.   | Development  |   |                                      |                                   |                                   |                                      |
| J.   | Capital Fund Financing –<br>Debt Service             |   |                                      |                                   |                                   |                                      |
| K.   | Total CFP Funds                                      | (///////                                    |                                      |                                   |                                   |                                      |
| L.   | Total Non-CFP Funds                                  |   |                                      |                                   |                                   |                                      |
| M.   | Grand Total  |   |                                      |                                   |                                   |                                      |

| Part | Part I: Summary (Continuation) |                               |                               |                               |                               |                               |  |  |  |  |  |  |  |  |
|------|--------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|--|--|--|--|--|--|--|
| PHA  | Name/Number                    |                               | Locality (City/o              | county & State)               | Original 5-Year Plan          | Revision No:                  |  |  |  |  |  |  |  |  |
| A.   | Development Number<br>and Name | Work Statement for Year 1 FFY | Work Statement for Year 2 FFY | Work Statement for Year 3 FFY | Work Statement for Year 4 FFY | Work Statement for Year 5 FFY |  |  |  |  |  |  |  |  |
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| Part II: Sup                                 | porting Pages – Physic   | cal Needs Work State    | ement(s)       |  |                          |                |  |  |  |  |  |
|--|--|-------------------------|----------------|--|--------------------------|----------------|--|--|--|--|--|
| Work   |  | ement for Year2012      |                |  |                          |                |  |  |  |  |  |
| Statement for                                |  | FFY                     |                |  | FFY                      |                |  |  |  |  |  |
| Year 1 FFY _2011                             | Development Number/Name General Description of Major Work Categories | Quantity                | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity                 | Estimated Cost |  |  |  |  |  |
|  | Ca074  | 1                       | \$215,000      | Ca074  | 1                        | \$215,000      |  |  |  |  |  |
| / Kphyal                                     | Operations   |                         |                | Operations   |                          |                |  |  |  |  |  |
| Statement                                    | Leahy Square   |                         |                | Leahy Square   |                          |                |  |  |  |  |  |
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|  | Subt   | total of Estimated Cost | \$             | Sul  | ototal of Estimated Cost | \$ 215,000     |  |  |  |  |  |
|  | Subt   | oral of Estimated Cost  | 215,000        | Suc  | Stotal of Estimated Cost | 7,000          |  |  |  |  |  |

| Part II: Sup                            | porting Pages – Physic  | cal Needs Work State    | ement(s)       |  |                         |                |  |  |  |  |  |
|---|---|-------------------------|----------------|--|-------------------------|----------------|--|--|--|--|--|
| Work                                    | Work Stat   | ement for Year2014_     |                | Work Statement for Year:2015   |                         |                |  |  |  |  |  |
| Statement for                           |   | FFY                     |                |  | FFY                     |                |  |  |  |  |  |
| Year 1 FFY                              | Development Quantity Number/Name General Description of Major Work Categories |                         | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity                | Estimated Cost |  |  |  |  |  |
| ///\$\\//                               | Ca074   | 1                       | \$215,000      | Ca074  | 1                       | \$215,000      |  |  |  |  |  |
| / Xphylal                               | Operations  |                         |                | Operations   |                         |                |  |  |  |  |  |
| Statement                               | Leahy Square  |                         |                | Leahy Square   |                         |                |  |  |  |  |  |
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|   |   |                         | 215,000        |  |                         |                |  |  |  |  |  |

| Part III: Sup | porting Pages – Management Needs Worl                                   |                |   |                |
|---------------|---|----------------|---|----------------|
| Work          | Work Statement for Year   |                | Work Statement for Year:  |                |
| Statement for | FFY   |                | FFY   |                |
| Year 1 FFY    | Development Number/Name<br>General Description of Major Work Categories | Estimated Cost | Development Number/Name<br>General Description of Major Work Categories | Estimated Cost |
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|               | Subtotal of Estimated Cost  | \$             | Subtotal of Estimated Cost  | \$             |

| Part III: Sup | porting Pages – Management Needs Worl                                   |                |   |                |
|---------------|---|----------------|---|----------------|
| Work          | Work Statement for Year   |                | Work Statement for Year:  |                |
| Statement for | FFY   |                | FFY   |                |
| Year 1 FFY    | Development Number/Name<br>General Description of Major Work Categories | Estimated Cost | Development Number/Name<br>General Description of Major Work Categories | Estimated Cost |
| 11/56/1/      |   |                |   |                |
| Andal         |   |                |   |                |
| Statement/    |   |                |   |                |
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|               |   |                |   |                |
|               | Subtotal of Estimated Cost  | \$             | Subtotal of Estimated Cost  | \$             |

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

|                 | FFY of Grant Approval:   | sion no: )   | Total Actual Cost 1            | Obligated Expended            |                     |  |                              |   |            |                         |                     |  |                       |                          |   |                              |                             |                 |                                   |                         |                               |
|-----------------|--|--|--------------------------------|-------------------------------|---------------------|--|------------------------------|---|------------|-------------------------|---------------------|--|-----------------------|--------------------------|---|------------------------------|-----------------------------|-----------------|-----------------------------------|-------------------------|-------------------------------|
|                 | 50111  | Revised Annual Statement (revision no:   | Total Estimated Cost           | Original Revised <sup>2</sup> |                     | \$215,000  |                              |   |            |                         |                     | A CONTRACTOR OF THE PROPERTY O |                       |                          |   |                              |                             |                 |                                   |                         |                               |
| Part I: Summary | PHA Name: Housing Authority of the Crant Type and Number Capital Fund Program Grant No. CA39P07450111 Replacement Housing Factor Grant No. Date of CFFP. | Type of Grant Original Annual Statement Performance and Evaluation Report for Period Ending: | Summary by Development Account |                               | Total non-CFP Funds | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup> | 1408 Management Improvements | 1410 Administration (may not exceed 10% of line 21) | 1411 Audit | 1415 Liquidated Damages | 1430 Fees and Costs | 1440 Site Acquisition  | 1450 Site Improvement | 1460 Dwelling Structures | 1465.1 Dwelling Equipment—Nonexpendable | 1470 Non-dwelling Structures | 1475 Non-dwelling Equipment | 1485 Demolition | 1492 Moving to Work Demonstration | 1495.1 Relocation Costs | 1499 Development Activities 4 |
| Part            | PHA<br>City (  |  | Line                           |                               | _                   | 2  | 3                            | 4   | 5          | 9                       | 7                   | ∞  | 6                     | 01                       | =                                       | 17                           | 13                          | 14              | 15                                | 16                      | 117                           |

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

| Part I: Summary                                      | mmarv   | The first transfer of |  |  | 130/00/1   |
|--|---|---|--|--|--|
| PHA Name: Housing Authority of the City of Livermore | thority Capital Fund Program Grant No: CA39P07450111 Replacement Housing Factor Grant No: Date of CFFP: |   | FFY of G   | FFY of Grant: 2011<br>FFY of Grant Approval:   |  |
| Type of Grant  |   |   |  |  |  |
| Origin   | Original Annual Statement   Reserve for Disasters/Emergencies   | <b>S</b> î  | ☐ Revised Annu   | Revised Annual Statement (revision no:   |  |
| Perfo  | Performance and Evaluation Report for Period Ending:  |   | Final Perform  | Tinal Performance and Evaluation Report  |  |
| Line   | Summary by Development Account  | Total Estimated Cost  | nated Cost   | Total Actual Cost  | ual Cost 1   |
|  |   | Original  | Revised 2  | Obligated  | Expended   |
| 18a  | 1501 Collateralization or Debt Service paid by the PHA  |   | THE PROPERTY OF THE PROPERTY O |  |  |
| 18ba   | 9000 Collateralization or Debt Service paid Via System of Direct Payment                                |   |  |  |  |
| 19   | 1502 Contingency (may not exceed 8% of line 20)   |   |  |  |  |
| 20   | Amount of Annual Grant:: (sum of lines 2 - 19)  | \$215,000   |  |  |  |
| 21   | Amount of line 20 Related to LBP Activities   |   |  |  | The state of the s |
| 22   | Amount of line 20 Related to Section 504 Activities   |   |  | The state of the s |  |
| 23   | Amount of line 20 Related to Security - Soft Costs  |   |  |  |  |
| 24   | Amount of line 20 Related to Security - Hard Costs  |   |  |  |  |
| 25   | Amount of line 20 Related to Energy Conservation Measures   |   |  |  |  |
| Signatur   | Signature of Executive Director For Date Date   | 2 114 2011 Signatu  | Signature of Public Housing Director   | rector   | Date   |

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.
<sup>4</sup> RHF funds shall be included here.

**Expires 4/30/2011** 

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

| Part II. Sunnorting Pages           |  |   |  |             |                      |                      |                                 |                                |                |
|-------------------------------------|--|---|--|-------------|----------------------|----------------------|---------------------------------|--------------------------------|----------------|
| PHA Name: Housing A                 | ithority of the City of Livermore            | Grant Type<br>Capital Fun<br>CFFP (Yes/<br>Replacemen | Grant Type and Number Capital Fund Program Grant No: Ca39P074501111 CFFP (Yes/ No): Replacement Housing Factor Grant No: | Ca39P074501 | =                    | Federal F            | Federal FFY of Grant: 2011      | 011                            |                |
| Development Number<br>Name/PHA-Wide | General Description of Major Work Categories |   | Development<br>Account No.   | Quantity    | Total Estimated Cost | ited Cost            | Total Actual Cost               | Cost                           | Status of Work |
| Activities                          |  |   |  |             | Original             | Revised <sup>1</sup> | Funds<br>Obligated <sup>2</sup> | Funds<br>Expended <sup>2</sup> |                |
| Ca074                               | Operations                                   |   | 1406   |             | \$215,000            |                      |                                 |                                |                |
| Leahy Square                        |  |   |  |             |                      |                      |                                 |                                |                |
|                                     |  |   |  |             |                      |                      |                                 |                                |                |
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 $<sup>^1\,{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2\,{\rm To}$  be completed for the Performance and Evaluation Report.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

| Part II: Supporting Pages           |   |   |   |          |                      |           | 7  |                                |                |
|-------------------------------------|---|---|---|----------|----------------------|-----------|--|--------------------------------|----------------|
| PHA Name:                           |   | Grant Type<br>Capital Fun<br>CFFP (Yes/<br>Replacemen | Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: | ant No:  |                      | rederal r | Federal FFT of Grant:  |                                |                |
| Development Number<br>Name/PHA-Wide | General Description of Major Work<br>Categories |   | Development<br>Account No.  | Quantity | Total Estimated Cost | ated Cost | Total Actual Cost  | Cost                           | Status of Work |
| Activities                          |   |   |   |          | Original             | Revised 1 | Funds<br>Obligated <sup>2</sup>  | Funds<br>Expended <sup>2</sup> |                |
|                                     |   |   |   |          |                      |           |  | -                              |                |
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 $<sup>^1\,{\</sup>rm To}$  be completed for the Performance and Evaluation Report or a Revised Annual Statement.  $^2\,{\rm To}$  be completed for the Performance and Evaluation Report.

| Part III: Implementation Schedule for Capital Fund Financing Program | dule for Capital Fund              | Financing Program  |                                  |   |   |
|--|------------------------------------|--|----------------------------------|---|---|
| PHA Name: Housing Authority of the City of Livermore                 | ty of the City of Liver            | more   |                                  |   | Federal FFY of Grant: 2011  |
| Development Number<br>Name/PHA-Wide<br>Activities                    | All Fund<br>(Quarter E             | All Fund Obligated<br>(Quarter Ending Date)  | All Funds<br>(Quarter E          | All Funds Expended<br>(Quarter Ending Date) | Reasons for Revised Target Dates <sup>1</sup>   |
|  | Original<br>Obligation End<br>Date | Actual Obligation<br>End Date  | Original Expenditure<br>End Date | Actual Expenditure End<br>Date              |   |
|  | 03/31/13                           |  | 12/30/14                         |   |   |
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<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

|   |                       | Jates <sup>1</sup>                                |                                    |  |  |  |  |  |  |  |  |
|---|-----------------------|---|------------------------------------|--|--|--|--|--|--|--|--|
|   | Federal FFY of Grant: | Reasons for Revised Target Dates                  |                                    |  |  |  |  |  |  |  |  |
|   |                       | All Funds Expended<br>(Quarter Ending Date)       | Actual Expenditure End<br>Date     |  |  |  |  |  |  |  |  |
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| Kinancing Program   | 9 1 9                 | All Fund Obligated<br>(Quarter Ending Date)       | Actual Obligation<br>End Date      |  |  |  |  |  |  |  |  |
| lula for Canital Fund   |                       | All Fund<br>(Quarter E                            | Original<br>Obligation End<br>Date |  |  |  |  |  |  |  |  |
| n. + III. I Ilmantetien Schodule for Capital Rund Financing Program | PHA Name:             | Development Number<br>Name/PHA-Wide<br>Activities |                                    |  |  |  |  |  |  |  |  |

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226 Expires 4/30/2011

| Type of Crant   Capital Final No.   Capital Figure and Number   Capital Figure and N  | Part I: | Part I: Summary  |  |                                |                                  |           |                       |
|---|---------|--|--|--------------------------------|----------------------------------|-----------|-----------------------|
| 2009   2011   2009   | PHA Na  | me:  a Authority of the City of Livermore  | Grant Type a Capital Fund Date of CFFF | nd Number<br>Program Grant No: |                                  |           | of Grant:             |
| Performance and Evaluation Report for Period Ending:   Total Estimated Cost   |         |  |  |                                |                                  |           | )9                    |
| Performance and Evaluation Report for Period Ending:   Displayed Annual Statement (Person no: )   | Type of | T State of the sta |  |                                |                                  |           |                       |
| Internation   |         | D  | isasters/Emel                          |                                | Kevised Annual Statement (revisi | on no: )  |                       |
| Inclaimancy by Development Account   Total Estimated Cost   Total non-CFF Funds   Tota  | Lene    | rmance and Evaluation Report for Period Enging:  |  |                                | Final Performance and Evaluation | n Report  |                       |
| Total non-CIPF Finds  | Line    | Summary by Development Account   |  | Total Es                       |                                  |           | ual Cost <sup>1</sup> |
| Total non-CPFP Funds   1406 Operations (may not exceed 20% of line 21)   1406 Operations (may not exceed 10% of line 21)   1416 Management Improvements   1419 Administration (may not exceed 10% of line 21)   1411 Audit   1411 Audit   1411 Audit   1411 Audit   1411 Audit   1412 Inquidated Damages   1415 Inquidated Damages   141  |         |  |  | Original                       | Revised <sup>2</sup>             |           |                       |
| 1406 Operations (may not exceed 20% of line 21)     1410 Administration (may not exceed 10% of line 21)     1411 Audit     1410 Administration (may not exceed 10% of line 21)     1411 Audit     1415 Siguidated Damages     1430 Site Improvement     14  | -       | Total non-CFP Funds  |  |                                |                                  |           |                       |
| 1408 Management Improvements   1410 Administration (may not exceed 10% of line 21).   1411 Audit   1410 Administration (may not exceed 10% of line 21).   1410 Administration (may not exceed 10% of line 21).   1411 Audit   14  | 2       | 1406 Operations (may not exceed 20% of line 21) 3  |  |                                |                                  |           |                       |
| 1410 Administration (may not exceed 10% of line 21)   1411 Audit   1411 Audit   1412 Audit   1413 Liquidated Damages   1430 Fees and Costs   1440 Site Acquisition   1440 Site Acquisition   1440 Site Acquisition   1440 Site Acquisition   1450 Site Improvement   1460 Dwelling Structures   \$275,123   1461 Dwelling Equipment   1460 Dwelling Equipment   1470 Non-dwelling Equipment   1485 Demolition   1492 Moving to Work Demostration   1492 Moving to Work Demostration   1495 Relocation Costs   1499 Development Activities   1499 Development Activities   1499 Development Activities   1499 Development Activities   1490 Development Acti   | w       | 1408 Management Improvements   |  |                                |                                  |           |                       |
| 1411 Audit   1411 Audit   1415 Equidated Damages   1435 Equidated Damages   1430 Fase and Costs   1430 Fase and Costs   1440 Site Acquisition   1450 Site Improvement   1450 Site Improvement   1460 Dwelling Structures   \$275,123   1465 I Dwelling Structures   \$275,123   1465 I Dwelling Equipment   Nonexpendable   1470 Non-dwelling Equipment   1485 Demolition   1495 Dwelopment Activities   1495 Dwelopment   1495  | 4       | 1410 Administration (may not exceed 10% of line 21)  |  |                                |                                  |           |                       |
| 1415 Liquidated Damages   | 5       | 1411 Audit   |  |                                |                                  |           |                       |
| 1430 Fees and Costs   1440 Site Acquisition   1450 Site Inprovement   1450 S  | 6       | 1415 Liquidated Damages  |  |                                |                                  |           |                       |
| 1440 Site Acquisition   | 7       | 1430 Fees and Costs  |  |                                |                                  |           |                       |
| 1450 Site Improvement   | ∞       | 1440 Site Acquisition  |  |                                |                                  |           |                       |
| 1460 Dwelling Structures   \$275,123   \$275,123   1465.   Dwelling Equipment—Nonexpendable   1470 Non-dwelling Equipment   1485 Demolition   1495 Demolition   1495 Demolition   1495 I Relocation Costs   1499 Development Activities   1499 Development Activities   1499 Development Activities   1499 Development Activities   1490 Development Activities   1501 Collateralization or Debt Service paid by the PHA   1501 Collateralization or Debt Service paid Via System of Direct   Payment   1502 Contingency (may not exceed 8% of line 20)   4 Amount of line 20 Related to Security – 19)   \$275,123 | 9       | 1450 Site Improvement  |  |                                |                                  |           |                       |
| 1465   Dwelling Equipment—Nonexpendable   1470 Non-dwelling Equipment   1470 Non-dwelling Equipment   1470 Non-dwelling Equipment   1470 Non-dwelling Equipment   1485 Demolition   1485 Demolition   1485 Demolition   1492 Moving to Work Demonstration   1492 Moving to Work Demonstration   1495   Relocation Costs   1495   Relocation Costs   1499 Development Activities   1501 Collateralization or Debt Service paid by the PHA   1502 Contingency (may not exceed 8% of line 20)   1502 Contingency (may not exceed 8% o  | 10      | 1460 Dwelling Structures   |  | \$275,123                      |                                  | \$275,123 | \$275,123             |
| 1470 Non-dwelling Structures  | Ξ       | 1465 I Dwelling Equipment—Nonexpendable  |  |                                |                                  |           |                       |
| 1475 Non-dwelling Equipment   | 12      | 1470 Non-dwelling Structures   |  |                                |                                  |           |                       |
| 1485 Demolition   1492 Moving to Work Demonstration   1492 Moving to Work Demonstration   1495 I Relocation Costs   1495 I Relocation Costs   1495 Development Activities   | 13      | 1475 Non-dwelling Equipment  |  |                                |                                  |           |                       |
| 1492 Moving to Work Denonstration   1495   Relocation Costs   1495   Relocation Costs   1495   Relocation Costs   1499 Development Activities   1499 Development Activities   1501 Collateralization or Debt Service paid by the PHA   9000 Collateralization or Debt Service paid Via System of Direct   Payment   1502 Contingency (may not exceed 8% of line 20)   1502 Contingency (may not exceed 8%   | 14      | 1485 Demolition  |  |                                |                                  |           |                       |
| 1495.1 Relocation Costs  1499 Development Activities 4  a 1501 Collateralization or Debt Service paid by the PHA ba 9000 Collateralization or Debt Service paid Via System of Direct Payment  1502 Contingency (may not exceed 8% of line 20)  Amount of Annual Grant: (sum of lines 2 – 19)  Annount of line 20 Related to LBP Activities  Amount of line 20 Related to Security – Soft Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Energy Conservation Measures   | 15      | 1492 Moving to Work Demonstration  |  | =                              |                                  |           |                       |
| 1499 Development Activities   | 16      | 1495.1 Relocation Costs  |  |                                |                                  |           |                       |
| a       1501 Collateralization or Debt Service paid by the PHA         ba       9000 Collateralization or Debt Service paid Via System of Direct         Payment       1502 Contingency (may not exceed 8% of line 20)         Amount of Annual Grant: (sum of lines 2 – 19)       \$275,123         Amount of line 20 Related to LBP Activities       \$275,123         Amount of line 20 Related to Security – Soft Costs       \$275,123         Amount of line 20 Related to Security – Hard Costs       \$275,123         Amount of line 20 Related to Security – Hard Costs       \$275,123   | 17      | 1499 Development Activities 4  |  |                                |                                  |           |                       |
| ba 9000 Collateralization or Debt Service paid Via System of Direct Payment  1502 Contingency (may not exceed 8% of line 20) Amount of Annual Grant: (sum of lines 2 – 19)  Amount of line 20 Related to LBP Activities  Amount of line 20 Related to Security – Soft Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs   | 18a     | 1501 Collateralization or Debt Service paid by the PH.   |  |                                |                                  |           |                       |
| Payment   Paym  | 18ba    | 9000 Collateralization or Debt Service paid Via Syster   | n of Direct                            |                                |                                  |           |                       |
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|   | 21      | Amount of line 20 Related to LBP Activities  |  |                                |                                  | 41.43.44  | \$E. 0, 1E0           |
|   | 22      | Amount of line 20 Related to Section 504 Activities  |  |                                |                                  |           |                       |
|   | 23      | Amount of line 20 Related to Security - Soft Costs   |  |                                |                                  |           |                       |
| L   | 24      | Amount of line 20 Related to Security - Hard Costs   |  |                                |                                  |           |                       |
|   | 25      | Amount of line 20 Related to Energy Conservation Me  | asures                                 |                                |                                  |           |                       |

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

|                      |                        |   | 5/26/11                        |                                   | Lat D. Otaras  |        |
|----------------------|------------------------|---|--------------------------------|-----------------------------------|--|--------|
| Date                 | Director               | Signature of Public Housing Director    | Date                           |                                   | Signature of Executive Director                      | Signa  |
| Expended             | Obligated              | Revised <sup>2</sup>                    | Original                       |                                   |  |        |
| Total Actual Cost 1  | Total Ac               | Total Estimated Cost                    | Total Es                       |                                   | Summary by Development Account                       | Line   |
|                      | n Report               | Final Performance and Evaluation Report |                                |                                   | Performance and Evaluation Report for Period Ending: | Per    |
|                      | on no: )               | Revised Annual Statement (revision no:  |                                | Reserve for Disasters/Emergencies | Type of Grant ☐Original Annual Statement ☐Reserve fo |        |
| 009                  | 2009                   |   |                                |                                   |  |        |
| Y of Grant Approval: | 99 FF                  | ,                                       | P                              | Date of CFFP:                     | Housing Authority of the City of Livermore           | Hous   |
| 009                  | Grant No: CA39S07450 2 | Replacement Housing Factor              | Capital Fund Program Grant No: | Capital Fun                       |  |        |
| Y of Grant:          | FF                     |   | Grant Type and Number          | Grant Type                        | PHA Name:  | PHA I  |
|                      |                        |   |                                |                                   | Part I: Summary                                      | Part l |

| **** * * *                  |  |                                |   |              |                          |            |                                 |                                |                |
|-----------------------------|--|--------------------------------|---|--------------|--------------------------|------------|---------------------------------|--------------------------------|----------------|
| PHA Name:                   |  | Grant Type and Number          | Number  |              |                          |            | Federal FFY of Grant:           | Grant:                         |                |
| Livermore                   |  | Replacement Housing Factor Gra | Capital Fund Program Grant No: CA39S07450109 Replacement Housing Factor Grant No: CA39S07450109 | No: CA39S074 | CFFP (Yes/ No):<br>50109 | es/ No):   | 2009                            |                                |                |
| Development<br>Number       | General Description of Major Work Categories | Major Work                     | Development Account No.   | Quantity     | Total Estimated Cost     | nated Cost | Total Actual Cost               | tual Cost                      | Status of Work |
| Name/PHA-Wide<br>Activities |  |                                |   |              |                          |            |                                 |                                |                |
|                             |  |                                |   |              | Original                 | Revised 1  | Funds<br>Obligated <sup>2</sup> | Funds<br>Expended <sup>2</sup> |                |
| CA074001                    | Replace old dwelling windows                 | ) windows                      | 1460  | 561          | \$170,333                |            | \$170,333                       | \$170,333                      | 100%Complete   |
| Leahy Square                | with energy efficient windows                | windows                        |   |              |                          |            |                                 |                                |                |
|                             | Replace patio sliding glass doors            | glass doors                    | 1460  | 88           | \$104,790                |            | \$104,790                       | \$104,790                      | 100%Complete   |
|                             |  |                                |   |              |                          |            |                                 |                                |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part II: Supporting Pages                   | ages   |   |  |          |                      |                 |                       |                     |                |
|---|--|---|--|----------|----------------------|-----------------|-----------------------|---------------------|----------------|
| PHA Name:                                   |  | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Gra | Number<br>ram Grant No:<br>sing Factor Grant N | Zo:      | CFFP (               | CFFP (Yes/ No): | Federal FFY of Grant: | ant:                | ·              |
| Development Number Name/PHA-Wide Activities | General Description of Major Work Development Q Categories Account No. | of Major Work<br>es   | Development<br>Account No.                     | Quantity | Total Estimated Cost | nated Cost      | Total Actual Cost     | al Cost             | Status of Work |
|   |  |   |  |          | Original             | Revised 1       | Funds Obligated       | Funds Expended $^2$ |                |
|   |  |   |  |          |                      |                 |                       |                     |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund Fi                | nancing Program   |  |                     |                                  |
|--|--|-------------------|--|---------------------|----------------------------------|
| PHA Name: Housing Au   | Housing Authority of the City of Livermore | ermore            |  |                     | Federal FFY of Grant:<br>2009    |
| Development Number<br>Name/PHA-Wide                                  | All Fund Obligated (Ouarter Ending Date)   | ligated ng Date)  | All Funds Expended (Ouarter Ending Date) | Expended ding Date) | Reasons for Revised Target Dates |
| Activities   |  |                   |  | -                   |                                  |
|  | Original Obligation                        | Actual Obligation | Original Expenditure                     | Actual Expenditure  |                                  |
| CA074001   | 06/30/09                                   | 11/01/09          | 12/31/09                                 | 03/31/10            |                                  |
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<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund Fi                 | nancing Program               |  |                                |   |
|--|---|-------------------------------|--|--------------------------------|---|
| PHA Name:  |   |                               |  |                                | Federal FFY of Grant:   |
| Development Number Name/PHA-Wide Activities                          | All Fund Obligated<br>(Quarter Ending Date) | ligated<br>ng Date)           | All Funds Expended (Quarter Ending Date) | Expended ding Date)            | Reasons for Revised Target Dates  |
|  | Original Obligation<br>End Date             | Actual Obligation<br>End Date | Original Expenditure<br>End Date         | Actual Expenditure<br>End Date |   |
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<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Part I:       | Part I: Summary  |  |  |   |                  |                                |
|---------------|--|--|--|---|------------------|--------------------------------|
| PHA Name:     | ime:   | Grant Type and Number Capital Fund Program Gra | Grant Type and Number Capital Fund Program Grant No: CA39PO7450109   | Replacement Housing I                   | Factor Grant No. | FFY of Grant:<br>2009          |
| Housin        | Housing Authority of the City of Livermore                       | Date of CFFP                                   |  | replacement from the                    |                  | FFY of Grant Approval:<br>2009 |
| Type of Grant |  |  |  |   |                  |                                |
|               | Original Annual Statement    Reserve for Disasters/Emergencies   | )isasters/Emer                                 |  | Revised Annual Statement (revision no:  | ion no:          |                                |
| Ţ.i.ci ii     | a citormance and Dyamation report for 1 citor Enging.            |  |  | Final Performance and Evaluation Report | n Keport         |                                |
| Line          | Summary by Development Account                                   |  | Total Es   | Total Estimated Cost                    | Total A          | Total Actual Cost '            |
|               |  |  | Original   | Revised <sup>2</sup>                    | Obligated        | Expended                       |
| -             | Total non-CFP Funds  |  |  |   |                  |                                |
| 2             | 1406 Operations (may not exceed 20% of line 21) 3                |  | \$215,809  |   | \$215,809        | \$106,821                      |
| ယ             | 1408 Management Improvements                                     |  |  |   |                  |                                |
| 4             | 1410 Administration (may not exceed 10% of line 21)              |  |  |   |                  |                                |
| 5             | 1411 Audit   |  |  |   |                  |                                |
| 6             | 1415 Liquidated Damages  |  |  |   |                  |                                |
| 7             | 1430 Fees and Costs  |  |  |   |                  |                                |
| ∞             | 1440 Site Acquisition  |  |  |   |                  |                                |
| 9             | 1450 Site Improvement  |  |  |   |                  |                                |
| 10            | 1460 Dwelling Structures   |  |  |   |                  |                                |
| Ξ             | 1465.1 Dwelling Equipment—Nonexpendable                          |  |  |   |                  |                                |
| 12            | 1470 Non-dwelling Structures                                     |  |  |   |                  |                                |
| 13            | 1475 Non-dwelling Equipment                                      |  |  |   |                  |                                |
| 14            | 1485 Demolition  |  |  |   |                  |                                |
| 15            | 1492 Moving to Work Demonstration                                |  |  |   |                  |                                |
| 16            | 1495.1 Relocation Costs  |  |  |   |                  |                                |
| 17            | 1499 Development Activities 4                                    |  |  |   |                  |                                |
| 18a           | 1501 Collateralization or Debt Service paid by the PHA           | A  |  |   |                  |                                |
| 18ba          | 9000 Collateralization or Debt Service paid Via System of Direct | n of Direct                                    |  |   |                  |                                |
| 10            | 1502 Contingency (may not exceed 8% of line 20)                  |  |  |   |                  |                                |
| 20            | Amount of Annual Grant: (sum of lines 2 – 19)                    |  | \$215.809  |   |                  |                                |
| 21            | Amount of line 20 Related to LBP Activities                      |  |  |   |                  |                                |
| 22            | Amount of line 20 Related to Section 504 Activities              |  |  |   |                  |                                |
| 23            | Amount of line 20 Related to Security - Soft Costs               |  |  |   |                  |                                |
| 24            | Amount of line 20 Related to Security - Hard Costs               |  | The state of the s |   |                  |                                |
| 25            | Amount of line 20 Related to Energy Conservation Measures        | easures  |  |   |                  |                                |

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

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|                        |           | ,   | 5/2//11  | ~ ·                               | Complete Com |                               |
| Date                   | director  | Signature of Public Housing Director  | Date .   |                                   | Signature of Executive Director  | Signatu                       |
| Expended               | Obligated | Revised <sup>2</sup>  | Original   |                                   |  |                               |
| Total Actual Cost 1    | Tota      | Total Estimated Cost  | Total Est  |                                   | Summary by Development Account   | Line                          |
|                        | n Report  | Final Performance and Evaluation Report   |  | eriod Ending:                     | Performance and Evaluation Report for Period Ending:   | □Perfo                        |
|                        | ) п по: ) | ☑Revised Annual Statement (revision no:   |  | Reserve for Disasters/Emergencies | nual Statement   | Type of Grant<br>☐Original An |
| FFY of Grant Approval: |           |   | H  | Date of CFFP                      | Housing Additionly of the City of Elverhole  | Henotti                       |
| FFY of Grant:<br>2009  | Grant No: | Grant Type and Number Capital Fund Program Grant No. CA39PO7450109 Replacement Housing Factor Grant No. | Grant Type and Number Capital Fund Program Grant No. CA39PO745 |                                   | me:  | PHA Name:                     |
|                        |           |   |  |                                   | Part I: Summary  | Part I:                       |

| rart II: Supporting rages                                  | ages   |  |  |           |                      |            |                                 |                                |                |
|--|--|--|--|-----------|----------------------|------------|---------------------------------|--------------------------------|----------------|
| PHA Name:<br>Housing Authority of the City of<br>Livermore | f the City of                                | Grant Type and Number Capital Fund Program Gra Replacement Housing Fac | Grant Type and Number Capital Fund Program Grant No: CA3907450109 Replacement Housing Factor Grant No: | CA3907450 | 109 CFFP (Yes/ No):  | es/ No):   | Federal FFY of Grant:<br>2009   | Grant:                         |                |
| Development<br>Number                                      | General Description of Major Work Categories | f Major Work   | Development Account No.  | Quantity  | Total Estimated Cost | nated Cost | Total Actual Cost               | tual Cost                      | Status of Work |
| Name/PHA-Wide<br>Activities                                |  |  |  |           |                      |            |                                 |                                |                |
|  |  |  |  |           | Original             | Revised 1  | Funds<br>Obligated <sup>2</sup> | Funds<br>Expended <sup>2</sup> |                |
| CA074  | Operations                                   | ร  | 1406   |           | \$215,809            |            | \$215,809                       | \$106,821                      | 49% complete   |
| Leahy Square   |  |  |  |           |                      |            |                                 |                                |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part II: Supporting Pages                   | ages  |   |   |          |                      |                 |                       |                                |                |
|---|---|---|---|----------|----------------------|-----------------|-----------------------|--------------------------------|----------------|
| PHA Name:                                   |   | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Gra | Number<br>gram Grant No:<br>sing Factor Grant N | Ao:      | CFFP (               | CFFP (Yes/ No): | Federal FFY of Grant: | ant:                           |                |
| Development Number Name/PHA-Wide Activities | General Description of Major Work<br>Categories | f Major Work Development Q  | Development<br>Account No.                      | Quantity | Total Estimated Cost | nated Cost      | Total Actual Cost     | al Cost                        | Status of Work |
|   |   |   |   |          | Original             | Revised 1       | Funds Obligated       | Funds<br>Expended <sup>2</sup> |                |
|   |   |   |   |          |                      |                 |                       |                                |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund Fi              | nancing Program               |  |                                |                                  |
|--|--|-------------------------------|--|--------------------------------|----------------------------------|
| PHA Name: Hlousing Authority of the City of Livermore                | thority of the City of Live              | rmore                         |  |                                | Federal FFY of Grant:<br>2009    |
| Development Number Name/PHA-Wide Activities                          | All Fund Obligated (Quarter Ending Date) | oligated<br>ng Date)          | All Funds Expended (Quarter Ending Date) | Expended ding Date)            | Reasons for Revised Target Dates |
|  | Original Obligation<br>End Date          | Actual Obligation<br>End Date | Original Expenditure<br>End Date         | Actual Expenditure<br>End Date |                                  |
| CA074  | 09/30/10                                 | 09/01/2009                    | 09/30/11                                 |                                |                                  |
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<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund F               | nancing Program               |   |                                |                                  |
|--|--|-------------------------------|---|--------------------------------|----------------------------------|
| PHA Name:  |  |                               |   |                                | Federal FFY of Grant:            |
| Development Number Name/PHA-Wide Activities                          | All Fund Obligated (Quarter Ending Date) | oligated<br>ng Date)          | All Funds Expended<br>(Quarter Ending Date) | Expended ding Date)            | Reasons for Revised Target Dates |
|  | Original Obligation<br>End Date          | Actual Obligation<br>End Date | Original Expenditure<br>End Date            | Actual Expenditure<br>End Date |                                  |
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Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Office of Public and Indian Housing OMB No. 2577-0226 U.S. Department of Housing and Urban Development **Expires 4/30/2011** 

| Part I:   | Part I: Summary  |   |   |                | t                                      |          |
|-----------|--|---|---|----------------|--|----------|
| PHA Name: | ате:   | Grant Type and Number   |   |                | FFY of Grant:                          |          |
| Housir    | Housing Authority of the City of Livermore                       | Capital Fund Program Grant No:<br>Date of CFFP: CA39PO7450110 | Replacement Housing Factor Grant No: —  | ctor Grant No: | 2010<br>FFY of Grant Approval:<br>2010 | oval:    |
| Type of   | Type of Grant Original Annual Statement                          | Reserve for Disasters/Emergencies                             | XRevised Annual Statement (revision no: | ision no:      |  |          |
| Perf      | Performance and Evaluation Report for Period Ending:             |   | Final Performance and Evaluation Report |                |  |          |
| TIME      | Summary by Development Account                                   | -   | I otal Estimated Cost                   | - 1            | Fotal Actual Cost                      |          |
|           |  | Original  | Revised 2                               | Obligated      | Expe                                   | Expended |
| _         | Total non-CFP Funds  |   |   |                |  |          |
| 2         | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup>     |   | \$215,287                               | \$ 42,000.     | \$ 26,006.                             |          |
| 3         | 1408 Management Improvements                                     |   |   |                |  |          |
| 4         | 1410 Administration (may not exceed 10% of line 21)              |   |   |                |  |          |
| 5         | 1411 Audit   |   |   |                |  |          |
| 9         | 1415 Liquidated Damages  |   |   |                |  |          |
| 7         | 1430 Fees and Costs  |   |   |                |  |          |
| ∞         | 1440 Site Acquisition  |   |   |                |  |          |
| 6         | 1450 Site Improvement  |   |   |                |  |          |
| 10        | 1460 Dwelling Structures   |   |   |                |  |          |
| 11        | 1465 I Dwelling Equipment—Nonexpendable                          |   |   |                |  |          |
| 12        | 1470 Non-dwelling Structures                                     |   |   |                |  |          |
| 13        | 1475 Non-dwelling Equipment                                      |   |   |                |  |          |
| 14        | 1485 Demolition  |   |   |                |  |          |
| 15        | 1492 Moving to Work Demonstration                                |   |   |                |  |          |
| 16        | 1495.1 Relocation Costs  |   |   |                |  |          |
| 17        | 1499 Development Activities 4                                    |   |   |                |  |          |
| 18a       | 1501 Collateralization or Debt Service paid by the PHA           | HA  |   |                |  |          |
| 18ba      | 9000 Collateralization or Debt Service paid Via System of Direct | em of Direct  |   |                |  |          |
| Š         | rayllicii  |   |   |                |  |          |
| 61        | 1502 Contingency (may not exceed 8% of line 20)                  |   |   |                |  |          |
| 70        | Amount of Annual Grant: (sum of lines 2 - 19)                    |   | \$215,287                               |                |  |          |
| 21        | Amount of line 20 Related to LBP Activities                      |   |   |                |  |          |
| 22        | Amount of line 20 Related to Section 504 Activities              |   |   |                |  |          |
| 23        | Amount of line 20 Related to Security - Soft Costs               |   |   |                |  |          |
| 24        | Amount of line 20 Related to Security - Hard Costs               |   |   |                |  |          |
| 25        | Amount of line 20 Related to Energy Conservation Measures        | <b>Jeasures</b>   |   |                |  |          |

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.
<sup>4</sup> RHF funds shall be included here.

| Part I: Summary                                      |  |  |           |                             |
|--|--|--|-----------|-----------------------------|
| PHA Name:  | Grant Type and Number  Capital Fund Program Grant No: CA39PO7450110 Replacement Housing Factor Grant No: | 30110 Replacement Housing Factor         |           | FFY of Grant:<br>2010       |
| Housing Authority of the City of Livermore           | Date of CFFP:  |  |           | FFY of Grant Approval: 2010 |
| Type of Grant  |  |  |           |                             |
| nual Statement                                       | ☐Reserve for Disasters/Emergencies   | ✓ Revised Annual Statement (revision no: | n no: )   |                             |
| Performance and Evaluation Report for Period Ending: |  | Final Performance and Evaluation Report  | Report    |                             |
| Line Summary by Development Account                  | Total Est  | Total Estimated Cost                     | Total     | Total Actual Cost 1         |
|  | Original   | Revised 2                                | Obligated | Expended                    |
| Signature of Executive Director                      | Date   | Signature of Public Housing Director     | director  | Date                        |
| you D. planey  | 5/26/11  |  |           |                             |
| 0  |  |  |           |                             |

| Part II: Supporting Pages                                  | Pages   |  |   |           |                      |            |                                 |                                |                |
|--|---|--|---|-----------|----------------------|------------|---------------------------------|--------------------------------|----------------|
| PHA Name:<br>Housing Authority of the City of<br>Livermore | of the City of                                  | Grant Type and Number<br>Capital Fund Program Gra<br>Replacement Housing Fac | Grant Type and Number Capital Fund Program Grant No: CA39P07450110 CFFP (Yes/ No): Replacement Housing Factor Grant No: | A39P07450 | 110 CFFP (Y          | es/ No):   | Federal FFY of Grant:<br>2010   | Grant:                         |                |
| Development<br>Number<br>Name/PHA-Wide<br>Activities       | General Description of Major Work<br>Categories | of Major Work<br>ies   | Development<br>Account No.  | Quantity  | Total Estimated Cost | nated Cost | Total Ac                        | Total Actual Cost              | Status of Work |
|  |   |  |   |           | Original             | Revised    | Funds<br>Obligated <sup>2</sup> | Funds<br>Expended <sup>2</sup> |                |
| CA074  | Operations                                      | suc  | 1406  |           |                      | \$215,287  | \$ 42,000                       | \$ 26,006                      | 12% Complete   |
| Leahy Square   |   |  |   |           |                      |            |                                 |                                |                |
|  |   |  |   |           |                      |            |                                 |                                |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part II: Supporting Pages                   | Pages   |   |             |                      |                      |                       |                                |                |
|---|---|---|-------------|----------------------|----------------------|-----------------------|--------------------------------|----------------|
| PHA Name:                                   | Grant Ty<br>Capital F<br>Renjacen               | Grant Type and Number Capital Fund Program Grant No: Renlacement Housing Factor Grant No: | No.         | CFFP (               | CFFP (Yes/ No):      | Federal FFY of Grant: | ant:                           |                |
| Development Number Name/PHA-Wide Activities | General Description of Major Work<br>Categories | Nork Development Account No.  | nt Quantity | Total Estimated Cost | nated Cost           | Total Actual Cost     | al Cost                        | Status of Work |
|   |   |   |             | Original             | Revised <sup>1</sup> | Funds Obligated       | Funds<br>Expended <sup>2</sup> |                |
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|   | W. C.       |   |             |                      |                      |                       |                                |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

|  | Federal FFY of Grant:<br>2010  | Reasons for Revised Target Dates                  |                                 |          |  |   |  |     |  |  |  |  |
|--|--|---|---------------------------------|----------|--|---|--|-----|--|--|--|--|
|  |  | Expended<br>ding Date)                            | Actual Expenditure<br>End Date  |          |  |   |  | - 1 |  |  |  |  |
|  | ted All Funds Expended Date  End Date End Date |   |                                 |          |  |   |  |     |  |  |  |  |
| Financing Program  | on Original Ex<br>End I<br>12/31   |   |                                 |          |  |   |  |     |  |  |  |  |
| hedule for Capital Fund  | Housing Authority of the City of Livermore   | All Fund (<br>(Quarter En                         | Original Obligation<br>End Date | 03/31/12 |  | - |  |     |  |  |  |  |
| Part III: Implementation Schedule for Capital Fund Financing Program | PHA Name: Housing Au   | Development Number<br>Name/PHA-Wide<br>Activities |                                 | CA074    |  |   |  |     |  |  |  |  |

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Part III: Implementation Schedule for Capital Fund Financing Program | hedule for Capital Fund F                   | inancing Program              |   |                                |                                  |   |
|--|---|-------------------------------|---|--------------------------------|----------------------------------|---|
| PHA Name:  |   |                               |   |                                | Federal FFY of Grant:            |   |
| Development Number<br>Name/PHA-Wide<br>Activities                    | All Fund Obligated<br>(Quarter Ending Date) | bligated<br>ing Date)         | All Funds Expended<br>(Quarter Ending Date) | Expended iding Date)           | Reasons for Revised Target Dates | T |
|  | Original Obligation<br>End Date             | Actual Obligation<br>End Date | Original Expenditure<br>End Date            | Actual Expenditure<br>End Date |                                  |   |
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<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Type of Crant   Capital Final No.   Capital Figure and Number   Capital Figure and N  | Part I: | Part I: Summary  |  |                              |                                  |                             |            |
|---|---------|--|--|------------------------------|----------------------------------|-----------------------------|------------|
| 2009     | PHA Na  | me:  g Authority of the City of Livermore  | Grant Type a Capital Fund Date of CFFF | Ind Number Program Grant No: |                                  |                             | of Grant:  |
| Performance and Evaluation Report for Period Ending:   Total Estimated Cost   |         |  |  |                              |                                  |                             | )9         |
| Performance and Evaluation Report for Period Ending:   Displayed Annual Statement (Person no: )   | Type of | T State of the sta |  |                              |                                  |                             |            |
| Internation   |         | D  | isasters/E mei                         |                              | Kevised Annual Statement (revis  | on no: )                    |            |
| Inclaimancy by Development Account   Total Estimated Cost   Total non-CFF Funds   Tota  | Lene    | rmance and Evaluation Report for Feriod Ending:  |  |                              | Final Performance and Evaluation | n Report                    |            |
| Total non-CIPF Finds  | Line    | Summary by Development Account   |  | Total Es                     |                                  |                             | ıal Cost 1 |
| Total non-CPFP Funds   1406 Operations (may not exceed 20% of line 21)   1406 Operations (may not exceed 10% of line 21)   1416 Management Improvements   1419 Administration (may not exceed 10% of line 21)   1411 Audit   1411 Audit   1411 Audit   1411 Audit   1411 Audit   1412 Inquidated Damages   1415 Inquidated Damages   141  |         |  |  | Original                     | Revised <sup>2</sup>             |                             |            |
| 1406 Operations (may not exceed 20% of line 21)     1410 Administration (may not exceed 10% of line 21)     1411 Audit     1410 Administration (may not exceed 10% of line 21)     1411 Audit     1415 Siguidated Damages     1430 Site Improvement     14  | -       | Total non-CFP Funds  |  |                              |                                  |                             |            |
| 1408 Management Improvements   1410 Administration (may not exceed 10% of line 21).   1411 Audit   1410 Administration (may not exceed 10% of line 21).   1410 Administration (may not exceed 10% of line 21).   1411 Audit   14  | 2       | 1406 Operations (may not exceed 20% of line 21) 3  |  |                              |                                  |                             |            |
| 1410 Administration (may not exceed 10% of line 21)   1411 Audit   1411 Audit   1412 Audit   1413 Liquidated Damages   1430 Fees and Costs   1440 Site Acquisition   1440 Site Acquisition   1440 Site Acquisition   1440 Site Acquisition   1450 Site Improvement   1460 Dwelling Structures   \$275,123   1461 Dwelling Equipment   1460 Dwelling Equipment   1470 Non-dwelling Equipment   1485 Demolition   1492 Moving to Work Demostration   1492 Moving to Work Demostration   1495 Relocation Costs   1499 Development Activities   1499 Development Activities   1499 Development Activities   1499 Development Activities   1490 Development Acti   | w       | 1408 Management Improvements   |  |                              |                                  |                             |            |
| 1411 Audit   1411 Audit   1415 Equidated Damages   1435 Equidated Damages   1430 Fase and Costs   1430 Fase and Costs   1440 Site Acquisition   1450 Site Improvement   1450 Site Improvement   1460 Dwelling Structures   \$275,123   1465 I Dwelling Structures   \$275,123   1465 I Dwelling Equipment   Nonexpendable   1470 Non-dwelling Equipment   1485 Demolition   1495 Dwelopment Activities   1495 Dwelopment   1495  | 4       | 1410 Administration (may not exceed 10% of line 21)  |  |                              |                                  |                             |            |
| 1415 Liquidated Damages   | 5       | 1411 Audit   |  |                              |                                  |                             |            |
| 1430 Fees and Costs   1440 Site Acquisition   1450 Site Inprovement   1450 S  | 6       | 1415 Liquidated Damages  |  |                              |                                  |                             |            |
| 1440 Site Acquisition   | 7       | 1430 Fees and Costs  |  |                              |                                  |                             |            |
| 1450 Site Improvement   | ∞       | 1440 Site Acquisition  |  |                              |                                  |                             |            |
| 1460 Dwelling Structures   \$275,123   \$275,123   1465.   Dwelling Equipment—Nonexpendable   1470 Non-dwelling Equipment   1485 Demolition   1495 Demolition   1495 Demolition   1495 I Relocation Costs   1499 Development Activities   1499 Development Activities   1499 Development Activities   1499 Development Activities   1490 Development Activities   1501 Collateralization or Debt Service paid by the PHA   1501 Collateralization or Debt Service paid Via System of Direct   Payment   1502 Contingency (may not exceed 8% of line 20)   4 Amount of line 20 Related to Security – 19)   \$275,123 | 9       | 1450 Site Improvement  |  |                              |                                  |                             |            |
| 1465   Dwelling Equipment—Nonexpendable   1470 Non-dwelling Equipment   1470 Non-dwelling Equipment   1470 Non-dwelling Equipment   1470 Non-dwelling Equipment   1485 Demolition   1485 Demolition   1485 Demolition   1492 Moving to Work Demonstration   1492 Moving to Work Demonstration   1495   Relocation Costs   1495   Relocation Costs   1499 Development Activities   1501 Collateralization or Debt Service paid by the PHA   1502 Contingency (may not exceed 8% of line 20)   1502 Contingency (may not exceed 8% o  | 10      | 1460 Dwelling Structures   |  | \$275,123                    |                                  | \$275,123                   | \$275,123  |
| 1470 Non-dwelling Structures  | Ξ       | 1465 I Dwelling Equipment—Nonexpendable  |  |                              |                                  |                             |            |
| 1475 Non-dwelling Equipment   | 12      | 1470 Non-dwelling Structures   |  |                              |                                  |                             |            |
| 1485 Demolition   1492 Moving to Work Demonstration   1492 Moving to Work Demonstration   1495 I Relocation Costs   1495 I Relocation Costs   1495 Development Activities   | 13      | 1475 Non-dwelling Equipment  |  |                              |                                  |                             |            |
| 1492 Moving to Work Denonstration   1495   Relocation Costs   1495   Relocation Costs   1495   Relocation Costs   1499 Development Activities   1499 Development Activities   1501 Collateralization or Debt Service paid by the PHA   9000 Collateralization or Debt Service paid Via System of Direct   Payment   1502 Contingency (may not exceed 8% of line 20)   1502 Contingency (may not exceed 8%   | 14      | 1485 Demolition  |  |                              |                                  |                             |            |
| 1495.1 Relocation Costs  1499 Development Activities 4  a 1501 Collateralization or Debt Service paid by the PHA ba 9000 Collateralization or Debt Service paid Via System of Direct Payment  1502 Contingency (may not exceed 8% of line 20)  Amount of Annual Grant: (sum of lines 2 – 19)  Annount of line 20 Related to LBP Activities  Amount of line 20 Related to Security – Soft Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Energy Conservation Measures   | 15      | 1492 Moving to Work Demonstration  |  | =                            |                                  |                             |            |
| 1499 Development Activities   | 16      | 1495.1 Relocation Costs  |  |                              |                                  |                             |            |
| a       1501 Collateralization or Debt Service paid by the PHA         ba       9000 Collateralization or Debt Service paid Via System of Direct         Payment       1502 Contingency (may not exceed 8% of line 20)         Amount of Annual Grant: (sum of lines 2 – 19)       \$275,123         Amount of line 20 Related to LBP Activities       \$275,123         Amount of line 20 Related to Security – Soft Costs       \$275,123         Amount of line 20 Related to Security – Hard Costs       \$275,123         Amount of line 20 Related to Security – Hard Costs       \$275,123   | 17      | 1499 Development Activities 4  |  |                              |                                  |                             |            |
| ba 9000 Collateralization or Debt Service paid Via System of Direct Payment  1502 Contingency (may not exceed 8% of line 20) Amount of Annual Grant: (sum of lines 2 – 19)  Amount of line 20 Related to LBP Activities  Amount of line 20 Related to Security – Soft Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs   | 18a     | 1501 Collateralization or Debt Service paid by the PH  |  |                              |                                  |                             |            |
| Payment   Paym  | 18ba    | 9000 Collateralization or Debt Service paid Via System   | n of Direct                            |                              |                                  |                             |            |
| Amount of line 20 Related to Security – Hard Costs     Amount of line 20 Related to Energy Conservation Measures  | ō       | 1507 Continuous (may not exceed 8% of line 70)   |  |                              |                                  |                             |            |
| Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Security – Hard Costs  Amount of line 20 Related to Energy Conservation Measures   | 20      | Amount of Annual Grant: (sum of lines 2 – 19)  |  | \$275 123                    |                                  | ¢275 123                    | CO75 100   |
|   | 21      | Amount of line 20 Related to LBP Activities  |  |                              |                                  | <b>41. 4)</b> 1. <b>4</b> ) | \$1.0, ino |
|   | 22      | Amount of line 20 Related to Section 504 Activities  |  |                              |                                  |                             |            |
|   | 23      | Amount of line 20 Related to Security - Soft Costs   |  |                              |                                  |                             |            |
| L   | 24      | Amount of line 20 Related to Security - Hard Costs   |  |                              |                                  |                             |            |
|   | 25      | Amount of line 20 Related to Energy Conservation Me  | asures                                 |                              |                                  |                             |            |

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

|                      |                        |   | 5/26/11                        |                                   | Late of ctares                                       |              |
|----------------------|------------------------|---|--------------------------------|-----------------------------------|--|--------------|
| Date                 | Director               | Signature of Public Housing Director    | Date                           |                                   | Signature of Executive Director                      | Signa        |
| Expended             | Obligated              | Revised <sup>2</sup>                    | Original                       |                                   |  |              |
| Total Actual Cost 1  | Total Ac               | Total Estimated Cost                    | Total Es                       |                                   | Summary by Development Account                       | Line         |
|                      | n Report               | Final Performance and Evaluation Report |                                |                                   | Performance and Evaluation Report for Period Ending: | Per          |
|                      | on no: )               | Revised Annual Statement (revision no:  |                                | Reserve for Disasters/Emergencies | Type of Grant ☐Original Annual Statement ☐Reserve fo | ∏ype<br>orie |
| 009                  | 2009                   |   |                                |                                   |  |              |
| Y of Grant Approval: | 99 FF                  | ,                                       | P                              | Date of CFFP:                     | Housing Authority of the City of Livermore           | Housi        |
| 009                  | Grant No: CA39S07450 2 | Replacement Housing Factor              | Capital Fund Program Grant No: | Capital Fun                       |  |              |
| Y of Grant:          | FF                     |   | Grant Type and Number          | Grant Type                        | PHA Name:  | PHA N        |
|                      |                        |   |                                |                                   | Part I: Summary                                      | Part I       |

| PHA Name:                   |  | Grant Type and Number          | Number  |              |                          |            | Federal FFY of Grant:           | Grant:                         |                |
|-----------------------------|--|--------------------------------|---|--------------|--------------------------|------------|---------------------------------|--------------------------------|----------------|
| Livermore                   |  | Replacement Housing Factor Gra | Capital Fund Program Grant No: CA39S07450109 Replacement Housing Factor Grant No: CA39S07450109 | No: CA39S074 | CFFP (Yes/ No):<br>50109 | es/ No):   | 2009                            |                                |                |
| Development<br>Number       | General Description of Major Work Categories | Major Work                     | Development Account No.   | Quantity     | Total Estimated Cost     | nated Cost | Total Actual Cost               | tual Cost                      | Status of Work |
| Name/PHA-Wide<br>Activities |  |                                |   |              |                          |            |                                 |                                |                |
|                             |  |                                |   |              | Original                 | Revised 1  | Funds<br>Obligated <sup>2</sup> | Funds<br>Expended <sup>2</sup> |                |
| CA074001                    | Replace old dwelling windows                 | y windows                      | 1460  | 561          | \$170,333                |            | \$170,333                       | \$170,333                      | 100%Complete   |
| Leahy Square                | with energy efficient windows                | windows                        |   |              |                          |            |                                 |                                |                |
|                             | Replace patio sliding glass doors            | glass doors                    | 1460  | 88           | \$104,790                |            | \$104,790                       | \$104,790                      | 100%Complete   |
|                             |  |                                |   |              |                          |            |                                 |                                |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part II: Supporting Pages                   | ages   |   |  |          |                      |                 |                       |                     |                |
|---|--|---|--|----------|----------------------|-----------------|-----------------------|---------------------|----------------|
| PHA Name:                                   |  | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Gra | Number<br>ram Grant No:<br>sing Factor Grant N | Zo:      | CFFP (               | CFFP (Yes/ No): | Federal FFY of Grant: | ant:                | ·              |
| Development Number Name/PHA-Wide Activities | General Description of Major Work Development Q Categories Account No. | of Major Work<br>es   | Development<br>Account No.                     | Quantity | Total Estimated Cost | nated Cost      | Total Actual Cost     | al Cost             | Status of Work |
|   |  |   |  |          | Original             | Revised 1       | Funds Obligated       | Funds Expended $^2$ |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund Fi                | nancing Program   |  |                     |                                  |
|--|--|-------------------|--|---------------------|----------------------------------|
| PHA Name: Housing Au   | Housing Authority of the City of Livermore | ermore            |  |                     | Federal FFY of Grant:<br>2009    |
| Development Number<br>Name/PHA-Wide                                  | All Fund Obligated (Ouarter Ending Date)   | ligated ng Date)  | All Funds Expended (Ouarter Ending Date) | Expended ding Date) | Reasons for Revised Target Dates |
| Activities   |  |                   |  | -                   |                                  |
|  | Original Obligation                        | Actual Obligation | Original Expenditure                     | Actual Expenditure  |                                  |
| CA074001   | 06/30/09                                   | 11/01/09          | 12/31/09                                 | 03/31/10            |                                  |
|  |  |                   |  |                     |                                  |
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|  |  |                   |  |                     |                                  |

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund Fi                 | nancing Program               |  |                                |   |
|--|---|-------------------------------|--|--------------------------------|---|
| PHA Name:  |   |                               |  |                                | Federal FFY of Grant:   |
| Development Number Name/PHA-Wide Activities                          | All Fund Obligated<br>(Quarter Ending Date) | ligated<br>ng Date)           | All Funds Expended (Quarter Ending Date) | Expended ding Date)            | Reasons for Revised Target Dates  |
|  | Original Obligation<br>End Date             | Actual Obligation<br>End Date | Original Expenditure<br>End Date         | Actual Expenditure<br>End Date |   |
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<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Part I:       | Part I: Summary  |  |  |   |                  |                                |
|---------------|--|--|--|---|------------------|--------------------------------|
| PHA Name:     | ime:   | Grant Type and Number Capital Fund Program Gra | Grant Type and Number Capital Fund Program Grant No: CA39PO7450109   | Replacement Housing I                   | Factor Grant No. | FFY of Grant:<br>2009          |
| Housin        | Housing Authority of the City of Livermore                       | Date of CFFP                                   |  | replacement from the                    |                  | FFY of Grant Approval:<br>2009 |
| Type of Grant |  |  |  |   |                  |                                |
|               | Original Annual Statement    Reserve for Disasters/Emergencies   | )isasters/Emer                                 |  | Revised Annual Statement (revision no:  | ion no:          |                                |
| Ţ.i.ci ii     | a citormance and Dyamation report for 1 citor Enging.            |  |  | Final Performance and Evaluation Report | n Keport         |                                |
| Line          | Summary by Development Account                                   |  | Total Es   | Total Estimated Cost                    | Total A          | Total Actual Cost '            |
|               |  |  | Original   | Revised <sup>2</sup>                    | Obligated        | Expended                       |
| -             | Total non-CFP Funds  |  |  |   |                  |                                |
| 2             | 1406 Operations (may not exceed 20% of line 21) 3                |  | \$215,809  |   | \$215,809        | \$106,821                      |
| ယ             | 1408 Management Improvements                                     |  |  |   |                  |                                |
| 4             | 1410 Administration (may not exceed 10% of line 21)              |  |  |   |                  |                                |
| 5             | 1411 Audit   |  |  |   |                  |                                |
| 6             | 1415 Liquidated Damages  |  |  |   |                  |                                |
| 7             | 1430 Fees and Costs  |  |  |   |                  |                                |
| ∞             | 1440 Site Acquisition  |  |  |   |                  |                                |
| 9             | 1450 Site Improvement  |  |  |   |                  |                                |
| 10            | 1460 Dwelling Structures   |  |  |   |                  |                                |
| Ξ             | 1465.1 Dwelling Equipment—Nonexpendable                          |  |  |   |                  |                                |
| 12            | 1470 Non-dwelling Structures                                     |  |  |   |                  |                                |
| 13            | 1475 Non-dwelling Equipment                                      |  |  |   |                  |                                |
| 14            | 1485 Demolition  |  |  |   |                  |                                |
| 15            | 1492 Moving to Work Demonstration                                |  |  |   |                  |                                |
| 16            | 1495.1 Relocation Costs  |  |  |   |                  |                                |
| 17            | 1499 Development Activities 4                                    |  |  |   |                  |                                |
| 18a           | 1501 Collateralization or Debt Service paid by the PHA           | A  |  |   |                  |                                |
| 18ba          | 9000 Collateralization or Debt Service paid Via System of Direct | n of Direct                                    |  |   |                  |                                |
| 10            | 1502 Contingency (may not exceed 8% of line 20)                  |  |  |   |                  |                                |
| 20            | Amount of Annual Grant: (sum of lines 2 – 19)                    |  | \$215.809  |   |                  |                                |
| 21            | Amount of line 20 Related to LBP Activities                      |  |  |   |                  |                                |
| 22            | Amount of line 20 Related to Section 504 Activities              |  |  |   |                  |                                |
| 23            | Amount of line 20 Related to Security - Soft Costs               |  |  |   |                  |                                |
| 24            | Amount of line 20 Related to Security - Hard Costs               |  | The state of the s |   |                  |                                |
| 25            | Amount of line 20 Related to Energy Conservation Measures        | easures  |  |   |                  |                                |

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

|                        |           |   | 0.76   | C                                 |  |                               |
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|                        |           | ,   | 5/2//11  | ~ ·                               | Complete Com |                               |
| Date                   | director  | Signature of Public Housing Director  | Date .   |                                   | Signature of Executive Director  | Signatu                       |
| Expended               | Obligated | Revised <sup>2</sup>  | Original   |                                   |  |                               |
| Total Actual Cost 1    | Tota      | Total Estimated Cost  | Total Est  |                                   | Summary by Development Account   | Line                          |
|                        | n Report  | Final Performance and Evaluation Report   |  | eriod Ending:                     | Performance and Evaluation Report for Period Ending:   | □Perfo                        |
|                        | ) п по: ) | ☑Revised Annual Statement (revision no:   |  | Reserve for Disasters/Emergencies | nual Statement   | Type of Grant<br>☐Original An |
| FFY of Grant Approval: |           |   | H  | Date of CFFP                      | Housing Additionly of the City of Elverhole  | Henotti                       |
| FFY of Grant:<br>2009  | Grant No: | Grant Type and Number Capital Fund Program Grant No. CA39PO7450109 Replacement Housing Factor Grant No. | Grant Type and Number Capital Fund Program Grant No. CA39PO745 |                                   | me:  | PHA Name:                     |
|                        |           |   |  |                                   | Part I: Summary  | Part I:                       |

| rart II: Supporting rages                                  | ages   |  |  |           |                      |            |                                 |                                |                |
|--|--|--|--|-----------|----------------------|------------|---------------------------------|--------------------------------|----------------|
| PHA Name:<br>Housing Authority of the City of<br>Livermore | f the City of                                | Grant Type and Number Capital Fund Program Gra Replacement Housing Fac | Grant Type and Number Capital Fund Program Grant No: CA3907450109 Replacement Housing Factor Grant No: | CA3907450 | 109 CFFP (Yes/ No):  | es/ No):   | Federal FFY of Grant:<br>2009   | Grant:                         |                |
| Development<br>Number                                      | General Description of Major Work Categories | f Major Work   | Development Account No.  | Quantity  | Total Estimated Cost | nated Cost | Total Actual Cost               | tual Cost                      | Status of Work |
| Name/PHA-Wide<br>Activities                                |  |  |  |           |                      |            |                                 |                                |                |
|  |  |  |  |           | Original             | Revised 1  | Funds<br>Obligated <sup>2</sup> | Funds<br>Expended <sup>2</sup> |                |
| CA074  | Operations                                   | ร  | 1406   |           | \$215,809            |            | \$215,809                       | \$106,821                      | 49% complete   |
| Leahy Square   |  |  |  |           |                      |            |                                 |                                |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part II: Supporting Pages                   | Pages   |   |   |          |                      |                 |                       |                                |                |
|---|---|---|---|----------|----------------------|-----------------|-----------------------|--------------------------------|----------------|
| PHA Name:                                   |   | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Gra | Number<br>gram Grant No:<br>sing Factor Grant N | Ao:      | CFFP (               | CFFP (Yes/ No): | Federal FFY of Grant: | ant:                           |                |
| Development Number Name/PHA-Wide Activities | General Description of Major Work<br>Categories | of Major Work Development Q   | Development<br>Account No.                      | Quantity | Total Estimated Cost | nated Cost      | Total Actual Cost     | al Cost                        | Status of Work |
|   |   |   |   |          | Original             | Revised 1       | Funds Obligated       | Funds<br>Expended <sup>2</sup> |                |
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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund Fi              | nancing Program               |  |                                |                                  |
|--|--|-------------------------------|--|--------------------------------|----------------------------------|
| PHA Name: Hlousing Authority of the City of Livermore                | thority of the City of Live              | rmore                         |  |                                | Federal FFY of Grant:<br>2009    |
| Development Number Name/PHA-Wide Activities                          | All Fund Obligated (Quarter Ending Date) | oligated<br>ng Date)          | All Funds Expended (Quarter Ending Date) | Expended ding Date)            | Reasons for Revised Target Dates |
|  | Original Obligation<br>End Date          | Actual Obligation<br>End Date | Original Expenditure<br>End Date         | Actual Expenditure<br>End Date |                                  |
| CA074  | 09/30/10                                 | 09/01/2009                    | 09/30/11                                 |                                |                                  |
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<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund Fi              | nancing Program               |  |                                |                                  |
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| PHA Name:  |  |                               |  |                                | Federal FFY of Grant:            |
| Development Number Name/PHA-Wide Activities                          | All Fund Obligated (Quarter Ending Date) | ligated<br>ng Date)           | All Funds Expended (Quarter Ending Date) | Expended ding Date)            | Reasons for Revised Target Dates |
|  | Original Obligation<br>End Date          | Actual Obligation<br>End Date | Original Expenditure<br>End Date         | Actual Expenditure<br>End Date |                                  |
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Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

## PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

## RESOLUTION #565

## PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the  $\_$  5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning  $\frac{7}{11}$ , hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

- 1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
- 2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
- 3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
- 4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
- 5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
- 6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
- 7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
- 8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a
    pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
- 9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
- 10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
- 11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

- 12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
- 13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
- 14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
- 15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
- 16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- 17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
- 18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
- 19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
- 20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
- 21. The PHA provides assurance as part of this certification that:

Previous version is obsolete

- (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
- (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
- (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
- 22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

| HOUSING AUTHORITY OF THE CITY OF LIVERMORE PHA Name  | Ca074<br>PHA Number/HA Code  |
|--|--|
| 5-Year PHA Plan for Fiscal Years 20 20   |  |
| X Annual PHA Plan for Fiscal Years 20 11 - 20  |  |
|  |  |
| I hereby certify that all the information stated herein, as well as any information provid prosecute false claims and statements. Conviction may result in criminal and/or civil per | ed in the accompaniment herewith, is true and accurate. Warning: HUD will enalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802) |
|  |  |
| Name of Authorized Official  | Title  |
| CARL ASBURY  | CHAIR, BOARD OF COMMISSIONERS  |
| Signature and Assets   | Date 4/13/11   |
|  |  |

Page 2 of 2

form HUD-50077 (4/2008)